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3.0 510(k) Summary

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Sponsor:

Synthes

Thomas N. Shea 1301 Goshen Parkway West Chester, PA 19380

(610) 719-6809

Device Name:

Synthes 3.5 mm VA-LCP Proximal Tibia Plate System

Classification:

Product Code – HRS/HWC, Plate, Fixation, Bone, Class II, §888.3030 – (Single/multiple component metallic bone fixation

appliances and accessories.)

Predicate Devices:

Synthes 4.5mm LCP Proximal Tibia Plate K011978

Synthes LCP Proximal Tibia Plate K052390

Synthes Large Fragment Dynamic Compression Locking (DCL)

System **K000682**

OrthoPediatrics PediLocTM Locking Plate System K083286

Device Description:

The Synthes 3.5 mm VA-LCP Proximal Tibia Plate System consists of pre-contoured bone fixation plates intended for the treatment of fractures of the proximal tibia. Variable angle screws can be angled up to 15 degrees from the normal trajectory prior to locking the screw to the plate. Percutaneous instrumentation will allow the variable angle plates and screws to be applied through minimally invasive

techniques.

Intended Use:

The Synthes 3.5 mm VA-LCP Proximal Tibia Plates are intended to treat fractures of the proximal tibia in adults and adolescents in which the growth plates have fused including: simple, comminuted, lateral wedge, depression, medial wedge, bicondylar combination of lateral wedge and depression, periprosthetic, and fractures with associated shaft fractures. Plates can also be used for treatment of nonunions, malunions, tibial osteotomies and osteopenic bone.

Substantial Equivalence:

Information presented supports substantial equivalence of the Synthes 3.5 mm VA-LCP Proximal Tibia Plate System to the predicate devices, Synthes 4.5mm LCP Proximal Tibia Plate K011978, Synthes Large Fragment Dynamic Compression Locking (DCL) System K000682, and Orthopediatrics PediLoc Locking Plate System K083286. The proposed tibia plates have the same indications for use, are similar in shape/design and incorporate the same fundamental technology.

Static and dynamic construct testing was conducted on the proposed plates and screws in order to demonstrate comparable mechanical performance to the predicate. The mechanical testing was designed to assess the fatigue strength and bending moment of the subject device.



The results of the mechanical evaluation confirm that the subject device is substantially equivalent to the predicate.



DEPARTMENT OF HEALTH & HUMAN SERVICES



Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

Synthes (USA) Products LLC % Mr. Thomas N. Shea Regulatory Affairs Specialist 1301 Goshen Parkway West Chester, Pennsylvania 19380

JUN - 4 2012

Re: K120689

Trade/Device Name: Synthes 3.5 mm VA-LCP Proximal Tibia Plate System

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation appliances and

accessories

Regulatory Class: Class II Product Code: HRS, HWC Dated: March 2, 2012 Received: March 6, 2012

Dear Mr. Shea:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Mark N. Melkerson

Director

Division of Surgical, Orthopedic, and Restorative Devices Office of Device Evaluation Center for Devices and

TEP CLIN DA

Radiological Health

Enclosure



2.0	Indications for Use
510(k) Number (if known): K120689
Device Name:	Synthes 3.5 mm VA-LCP Proximal Tibia Plate System
Indications for U	se:
fractures plates ha medial periprost	thes 3.5 mm VA-LCP Proximal Tibia Plates are intended to treat of the proximal tibia in adults and adolescents in which the growth twe fused including: simple, comminuted, lateral wedge, depression, wedge, bicondylar combination of lateral wedge and depression, thetic, and fractures with associated shaft fractures. Plates can also be retreatment of nonunions, malunions, tibial osteotomies and lic bone.
Prescription Use (21 CFR 801 Sul	X AND/OR Over-The-Counter Use opart D) (21 CFR 801 Subpart C)
(PLEASE DO N	OT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE I

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)
Division of Surgical, Orthopedic, and Restorative Devices

510(k) Number K 120689